PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									Application or Docket Number 1698,546						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS			6					RATE		FEE	1	RATE	FEE		
FOR ·			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			6 minus 20=		*	ש		X\$ 9=			OR	X\$18=	0		
INDEPENDENT CLAIMS			v minus 3 =		•	0 x		X43=	-		OR	X86=	0		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145:	=		OR	+290=	0		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	Ţ		OR	TOTAL	22()		
CLAIMS AS AMENDED - PART II												OTHER	THAN		
1	+4.	(Column 1)		(Column 2) (Column 3)				SMALL ENTITY		NTITY	QR .	SMALL			
AMENDMENT A	1/19/06	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MOZ	Total	. 6	Minus	** 2	20	<u>, </u>		X\$ 9=			OR	X\$18=			
ME	Independent	. 2	Minus	***	3	-		X43=			OR	X86=			
1	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		ļ.	+145=				+290=			
									AL		OP.	TOTAL			
(Column 1) (Column 2) (Column 3)								ADDIT. FE			OR	ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVICE PAID I	EST BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=			
	Independent	*	Minus	***		=]	X43=	1		OR	X86=			
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		!	+145=			OR	+290 <u>÷</u>			
TOTAL ADDIT. FEE											I	TOTAL ADDIT. FEE			
	(Column 1) (Column 2) (Column 3)										•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
§ [Total	*	Minus	44		=		X\$ 9=	T		OR	X\$18=			
WE	Indep ndent	*	Minus	***		=	 	X43=	1		OR	X86=			
`_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL				
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR ,	ADDIT. FEE			
		ber Previously Paid					r fou	nd in the	app	ropriate box	in col	umn 1.	,		